

APPENDIX 3
WMAF ALLOWABLE PROCEDURE CODES FOR NON-51.42 BOARD PROVIDERS

The following table lists the HCPCS procedure codes and description to be used for billing mental health and AODA services, who may bill the codes, what limitations apply, and their allowable diagnoses.

Codes Which May Be Billed by Non-51.42 Board Providers

<u>Proc. Code</u>	<u>Description</u>	<u>Who May Provide Service</u>	<u>Limitations**</u>	<u>Allowable Diagnoses</u>
90801	Psychiatric Evaluation	M.D., * Ph.D., M.S.	6 hrs./2 years	All
90835	Narcosynthesis	M.D., * Ph.D.	PA	290-316
90844	Individual Psychotherapy	M.D., * Ph.D., M.S.	PA	290-316
90845	Medical Psychoanalysis	M.D., * Ph.D., M.S.	PA	290-316
90846	Family Medical Psychotherapy (without recipient present)	M.S., * Ph.D., M.S.	PA	290-316
90847	Family Psychotherapy	M.D., * Ph.D., M.S.	PA	290-316
90849	Multiple-Family Group	M.D., * Ph.D., M.S.	PA, <u>not</u> allowable for POS 1	290-316
90853	Group Psychotherapy	M.D., * Ph.D., M.S.	PA, <u>not</u> allowable for POS 1	290-316
90862	Chemotherapy Management (Medication Check) (15 minutes)	M.D., R.N.	30 min./day 4/month, <u>not</u> allowable for POS 1	290-316
90870/ 90871	Electroconvulsive Therapy	M.D.	<u>Not</u> allowable for POS 7 or 8	290-316
90880	Hypnotherapy	M.D., * Ph.D., M.S.	PA	290-316, except 305.10
90887	Collateral Interview	M.D., * Ph.D., M.S.	PA	290-316
90900	Biofeedback	M.D., Ph.D., M.S.		307.80, 307.81, 346.0-346.9, and 784.0
90904	Biofeedback	M.D., Ph.D., M.S.		401.0-401.9

* Physician must be a psychiatrist in order to bill this code.

** Codes with the "PA" limitation accumulate toward the 15 hour/\$500 yearly threshold per recipient beyond which prior authorization is required.

NOTE: Services provided by master's level providers or AODA counselors are not billable in POS 1.

ADDITIONAL NOTE: Prior authorization is not required for services provided at the inpatient hospital setting (POS 1).

<u>Proc. Code</u>	<u>Description</u>	<u>Who May Provide Service</u>	<u>Limitations**</u>	<u>Allowable Diagnoses</u>
90908	Biofeedback	M.D., Ph.D., M.S.		300.00, 300.01, 300.02, and 300.21
W8968	Individual AODA Therapy	M.D., Ph.D., M.S., A.C.	PA	290-316
W8969	Group AODA Therapy	M.D., Ph.D., M.S., A.C.	PA, <u>not</u> allowable for POS 1	290-316
W8970	Family AODA Therapy	M.D., Ph.D., M.S., A.C.	PA	290-316
W8987	Limitation - Exceeded Psychotherapy/AODA Evaluation	M.D., * Ph.D., M.S.	PA	All

* Physician must be a psychiatrist in order to bill this code.

** Codes with the "PA" limitation accumulate toward the 15 hour/\$500 yearly threshold per recipient beyond which prior authorization is required.

NOTE: Services provided by master's level providers or AODA counselors are not billable in POS 1.

ADDITIONAL NOTE: Prior authorization is not required for services provided at the inpatient hospital setting (POS 1).